Best Available Copy

· -								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO											1		
Effective October 1, 2000								09842422 6 04890					
CLAIMS AS FILED - PART I							SMAL						
		•	(Column 1)		(Column 2)		TYPE			OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			23		(/		RAT	Έ	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			ි3 minus 20=		• 3		X\$ 9)= -		OR	X\$18=	54	
INDEPENDENT CLAIMS			3 minus 3 =		0		X40=			OR	X80=	j	
MU	ILTIPLE DEPEN	IDENT CLAIM P	RESENT				+135	+135=		OR	+270=		
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				TOTA	AL		OR	TOTAL	764	
CLAIMS AS AMENDED - PART II											OTHER		
_		(Column 1)	(Colur			(Column 3)	Column 3) SMALL		ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RAT	Ē	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Totai	*	Minus	**		=	X\$ 9)=	3	OR	X\$18=		
	Independent				=	X40	=		OR	X80=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+135	5=		OR	+270=		
								TAL			TOTAL		
	(Column 1) (Column 2) (Column							FEE		.	ADDIT. FEE	-	
AMENDMENT B	CLAIMS		HIGH		EST			-	ADDI-			ADDI-	
		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA	RAT	E	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=		
	Independent	* ·	Minus	***		=	X40	=		OR	X80=		
<u> </u>	FIRST PRESENTATION OF MU		JETIPLE DEPENDENT		CLAIM		+135	_		OR	+270=		
			· TO				TOTAL						
		ADDIT. F	EE L		JO.,	ADDIT. FEE							
		(Column 1) CLAIMS		(Colur HIGH	EST	(Column 3)		-	ADD!			ADD1	
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	DUSLY	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=		
	Independent	•	Minus	***		=	X40=			OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+135:	+					
• 11	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
		ber Previously Paid					found in the	арр	ropriate box	in colu	ımn 1.		